PTO/SB/17 (12-04v2) Approved for use through 7/31/2006. OMB 0651-0032

Under the perwork Reduction Act of 1995, no person are required to				Complete if Known					
Effective on 12/08/2004. ADEXADD dant to the Consolidated Appropriations Act, 2005 (H.R. 4818).						10/790,502-Conf. #1038			
FEE TRANSMITTAL				Filing Date Ma		March 1, 2004	March 1, 2004		
					Kanu G. Shah				
For FY 2005						M. D. Bissett			
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 1		1711			
TOTAL AMOUNT OF PAYMENT (\$) 1,110.00			Attorney Docket No. 60680-1843						
METHOD OF	PAYMENT (check	all that apply)				-			
METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify):									
Check Credit Card Money Order Other (please identity):    X   Deposit Account   Deposit Account Number: 18-0013   Deposit Account Name: Rader, Fishman & Grauer PLLC									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayment of X Credit any overpayments									
fee(s) under 37 CFR 1.16 and 1.17  FEE CALCULATION									
	G, SEARCH, AND E	YAMINATION FE	FS	<del></del>		<del></del>			
I. BASIC FILING	•	ILING FEES		ARCH FEES	EXAM	NATION FEES			
		Small Entity		<b>Small Entity</b>	= - (A)	Small Entity	Face (	Solid (#\	
Application Ty			Fee (\$		Fee (\$)		<u>rees r</u>	<u>Paid (\$)</u>	
Utility	300		500	250	200	100			
Design	200		100	50	130	65	•		
Plant	200		300	150	160	80			
Reissue	300		500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$)									
Fee Description								25	
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)							200	100	
Multiple depend		idding Keissues)					360	180	
1 .		Foo (\$)	Eoo	(\$) bic	R	Multiple Depende			
			Paid (\$) <u>Multiple Depe</u> Fee (\$)			Fee Paid (\$)			
14	- =0	× = _			-	<u>cc (\$)</u>		4	
Indep. Claims	Extra Claims	Fee (\$)	Fee	Paid (\$)	_			_	
				0.00					
3. APPLICATIO									
If the specifical	tion and drawings e	xceed 100 sheets	of paper	(excluding electronic	ronically	filed sequence or	computer		
listings und	er 37 CFR 1.52(e)),	the application si	ze fee di	ie is \$250 (\$125	for small	entity) for each a	dditional 5	0	
sheets or fra	action thereof. See					(4)	<b>5</b>	D=:d (#\	
Total Sheets				idditional 50 or fra			<u>Fee l</u>	<u>Paid (\$)</u>	
	100 =	/50		(round up to a wh	ole number	r) x	- <u> </u>	D-id (6)	
4. OTHER FEE(	•	00.5 (	. 4:4	4)			rees	<u>Paid (\$)</u>	
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00  1801 Request for continued examination (RCE) (see 37 790.00									
Other (e.g., la	ate filing surcharge	1801 Request	t for con	tinued examina	tion (RC	E) (see 37		90.00	
SUBMITTED BY Signature	<del>()</del>	h VA		Registration No.	36,018	3 Telephone	(248) 59	4-0633	
Name (Print/Type) Michael B. Stewart				(Attorney/Agent)		<del></del>	Septembe		
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							<del></del>		

Γ	Fee Transmittal
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	I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 130835151 US,
Ιį	in an envelope addressed to: MS RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown
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l	
١,	Dated: 9,9/05 Signature: Kallusk Plast (Kathryn L. Nash)